

DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that my residence, post office address and citizenship are as stated below next to my name; that I verily believe I am the original, first and sole inventor (if only one name is listed below) or a joint inventor (if plural inventors are named below) of the invention entitled:

HOCKEY TRAINING PUCKS AND METHODS OF USING SAME

which is described and claimed in:

the specification in application Serial No. 10/786,586 filed 24 February 2004

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge my duty to disclose information which is material to the patentability of this invention in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application on which priority is claimed:

Prior Foreign/PCT Application(s)				Priority Claimed?	
Serial No.	Country	Filing Date	Yes	No	

I hereby claim the benefit, under 35 U.S.C. §119(e), of any United States provisional application(s) that is/are listed below:

U.S. Provisional Patent Application	<u>s</u>
Serial No.	Filing Date
60/448,877	24 February 2003

I hereby claim the benefit, under 35 U.S.C. §120, of any United States application(s) or any PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose material information as defined in 37 C.F.R. §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

U.S. Patent Applications			Status (Check One)		
Serial No.		Filing Date	Patented	Pending	Abandoned
PCT Applications Designating US			Status (Check One)		
PCT No.	Filed	U.S.S.N.	Patented	Pending	Abandoned

I hereby appoint the following attorney(s) and/or agent(s), with full powers of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

<u>Name</u>	Regn. No.	<u>Name</u>	Regn. No.
Gerald O.S. Oyen Blake R. Wiggs Bruce M. Green David J. McGruder Thomas W. Bailey	27,280 29,505 30,524 32,375 36,411	Gavin N. Manning George F. Kondor Craig A. Ash Hilton W.C. Sue	36,412 40,477 48,228 51,325

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such wilful false statements may jeopardize the validity of the application or any patent issuing thereon.

Full name of sole

or first Inventor:

Glenn Pencer

Inventor's signature:

Date: 06-30-04

Residence Address:

9041 Hayward Place Delta, British Columbia

V4C 7L5 Canada

Citizenship:

Canadian

Mailing Address:

same as above

Sample Form (03-04)

AUTHORIZATION TO ACT IN A REPRESENTATIVE CAPACITY

C. W. W. S.	AUTHORIZATION TO ACT IN	A REPRESENT	ATIVE CA	PACITY
In re Applic				
Glenn Pe	acer			
Application				,
10/786,5	86			
Filed: February	24, 2004			
Title;	TRAINING PUCKS AND METHODS OF U	SING SAME		
Attorney Do		Art Unit:		
conc	practitioner named below is authorized to o emed. Furthermore, the practitioner is auti lostion pursuant to 37 CFR 1.34:	onduct Interviews a nonized to file corre	spondence in	the above-identified
	Name		Kegis	tration Number
	Charles D. McClung	. · . ·	26,568	
does not h abandonm assignee o	t a Power of Attorney to the above-name lave authority to sign a request to change the lant, a disclaimer, a power of attorney, or of if the entire interest or an attorney of record actitioner should be executed and filed in the	e correspondence rer document requi . If appropriate, a s	address, a re ring the algna reparate Pow	quest for an express iture of the applicant, ar of Attorney to the above-
	SIGNATURE o	Practitioner of Reco	nd	
Name	Thomas W. Bailey			
Signature	Thomas W. Bailey		Date	July 19, 2004
Registration Number	36,411		Telephone	(604) 669-3432

This form offers a sample of suggested formal for an authorization of a practitioner who is not of record. See MPEP § 719.05 for more information. This sample from is not an CMB officially approved form.

If you need assistance in completing the form, call 1-800-PTO-9188 and select option 2.